MARIAN FRANCISCAN CENTER - FDD

9632 WEST APPLETON AVENUE

MILWAUKEE 53225 Ownership: Phone: (414) 461-8850 Nonprofit Church Operated from 1/1 To 12/31 Days of Operation: 365 Highest Level License: FDDs Operate in Conjunction with CBRF? Operate in Conjunction with Hospital? Number of Beds Set Up and Staffed (12/31/02): Title 18 (Medicare) Certified? Total Licensed Bed Capacity (12/31/02): 63 Title 19 (Medicaid) Certified? Yes Number of Residents on 12/31/02: Average Daily Census:

Services Provided to Non-Residents		Length of Stay (12/31/02) %						
Home Health Care Supp. Home Care-Personal Care	No No	Primary Diagnosis	90	Age Groups	%	Less Than 1 Year	9.8 9.8	
Supp. Home Care-Household Services	No	Developmental Disabilities	100.0	Under 65	90.2	More Than 4 Years	80.3	
Day Services	No	Mental Illness (Org./Psy)	0.0	65 - 74	4.9			
Respite Care	Yes	Mental Illness (Other)	0.0	75 - 84	3.3		100.0	
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	1.6	********	*****	
dult Day Health Care No F		Para-, Quadra-, Hemiplegic	0.0	95 & Over	0.0	Full-Time Equivalent		
Congregate Meals	No	Cancer	0.0			Nursing Staff per 100 R	esidents	
Home Delivered Meals	No	Fractures	0.0		100.0	(12/31/02)		
Other Meals	No	Cardiovascular	0.0	65 & Over	9.8			
Transportation	No	Cerebrovascular	0.0			RNs	4.5	
Referral Service	No	Diabetes	0.0	Sex	용	LPNs	11.6	
Other Services	No	Respiratory	0.0			Nursing Assistants,		
Provide Day Programming for	- 1	Other Medical Conditions	0.0	Male	37.7	Aides, & Orderlies	51.7	
Mentally Ill	No			Female	62.3			
Provide Day Programming for	I		100.0	I				
Developmentally Disabled	Yes				100.0			

Method of Reimbursement

		edicare			edicaid itle 19			Other		P.	rivate Pay	:	:	Family Care			anaged Care	! 		
Level of Care	No.	o _l o	Per Diem (\$)	No.	90	Per Diem (\$)	No.	%	Per Diem (\$)	No.	olo	Per Diem (\$)	No.	0/0	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	of
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Intermediate				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				60	100.0	166	0	0.0	0	0	0.0	0	1	100.0	155	0	0.0	0	61	100.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depende	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	0	0.0		60	100.0		0	0.0		0	0.0		1	100.0		0	0.0		61	100.0

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Admissions, Discharges, and		Percent Distribution	of Residents'	Condit	ions, Services, an	d Activities as of 12	/31/02
Deaths During Reporting Period							
	I				% Needing		Total
Percent Admissions from:	1	Activities of	%	As	sistance of	% Totally	Number of
Private Home/No Home Health	25.0	Daily Living (ADL)	Independent	One	Or Two Staff	Dependent	Residents
Private Home/With Home Health	0.0	Bathing	3.3		24.6	72.1	61
Other Nursing Homes	12.5	Dressing	13.1		29.5	57.4	61
Acute Care Hospitals	12.5	Transferring	27.9		29.5	42.6	61
Psych. HospMR/DD Facilities	50.0	Toilet Use	24.6		27.9	47.5	61
Rehabilitation Hospitals	0.0					41.0	61
Other Locations	0.0	*****	*****	*****	*****	* * * * * * * * * * * * * * * * * * * *	******
Total Number of Admissions	8	Continence		8	Special Treatmen	ts	8
Percent Discharges To:		Indwelling Or Externa	al Catheter	1.6	Receiving Resp	iratory Care	1.6
Private Home/No Home Health	0.0	Occ/Freq. Incontinent	of Bladder	67.2	Receiving Trac	heostomy Care	0.0
Private Home/With Home Health	0.0	Occ/Freq. Incontinent	of Bowel	63.9	Receiving Suct	ioning	3.3
Other Nursing Homes	12.5				Receiving Osto	my Care	0.0
Acute Care Hospitals	12.5	Mobility			Receiving Tube	Feeding	18.0
Psych. HospMR/DD Facilities	25.0	Physically Restrained	Ĺ	4.9	Receiving Mech	anically Altered Diet	s 62.3
Rehabilitation Hospitals	0.0						
Other Locations	25.0	Skin Care			Other Resident C	haracteristics	
Deaths	25.0	With Pressure Sores		4.9	Have Advance D	irectives	0.0
Total Number of Discharges		With Rashes		1.6	Medications		
(Including Deaths)	8				Receiving Psyc	hoactive Drugs	62.3

	This Facility		DD ilities		All ilties	
	8 	% 	Ratio	% 	Ratio	
Occupancy Rate: Average Daily Census/Licensed Beds	98.4	83.9	1.17	85.1	1.16	
Current Residents from In-County	86.9	38.2	2.28	76.6	1.13	
Admissions from In-County, Still Residing	75.0	18.5	4.05	20.3	3.69	
Admissions/Average Daily Census	12.9	20.3	0.63	133.4	0.10	
Discharges/Average Daily Census	12.9	23.6	0.55	135.3	0.10	
Discharges To Private Residence/Average Daily Census	0.0	9.8	0.00	56.6	0.00	
Residents Receiving Skilled Care	0.0	0.0	0.00	86.3	0.00	
Residents Aged 65 and Older	9.8	15.3	0.64	87.7	0.11	
Title 19 (Medicaid) Funded Residents	98.4	99.2	0.99	67.5	1.46	
Private Pay Funded Residents	0.0	0.6	0.00	21.0	0.00	
Developmentally Disabled Residents	100.0	99.5	1.00	7.1	14.08	
Mentally Ill Residents	0.0	0.4	0.00	33.3	0.00	
General Medical Service Residents	0.0	0.1	0.00	20.5	0.00	
Impaired ADL (Mean) *	66.2	54.0	1.23	49.3	1.34	
Psychological Problems	62.3	48.2	1.29	54.0	1.15	
Nursing Care Required (Mean) *	11.5	11.3	1.01	7.2	1.59	